## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

| Application or Docket Number |
|------------------------------|
| 10687115                     |

|                         |                                                              |                                                                                                 | ve Octobe                                                  |                                                                            |                                                                                       |                                                                | _        |                                                                                   |                        |                |                                                                                          |                     |
|-------------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------------------------|----------|-----------------------------------------------------------------------------------|------------------------|----------------|------------------------------------------------------------------------------------------|---------------------|
|                         | (                                                            | CLAIMS AS                                                                                       | (Column                                                    |                                                                            | (Colum                                                                                | nn 2)                                                          |          | SMALL ENT                                                                         |                        | OR             | OTHER SMALL E                                                                            |                     |
|                         | L OLAIMS                                                     |                                                                                                 | //                                                         | <u>'-1</u>                                                                 |                                                                                       |                                                                | .        | RATE                                                                              | FEE                    | ſ              | RATE                                                                                     | FEE                 |
| TOTAL CLAIMS            |                                                              |                                                                                                 | 4                                                          |                                                                            |                                                                                       | DEVIDA                                                         |          | BASIC FEE                                                                         | 385.00                 | OR             | BASIC FEE                                                                                | 770.00              |
| FOR                     |                                                              |                                                                                                 | NUMBER FILED                                               |                                                                            | NUMBER EXTRA                                                                          |                                                                |          | \                                                                                 |                        | 1              | X\$18=                                                                                   |                     |
| TOTAL CHARGEABLE CLAIMS |                                                              |                                                                                                 | 4 minus 20=                                                |                                                                            | * /                                                                                   |                                                                |          | X\$ 9=                                                                            |                        | OR             |                                                                                          |                     |
| NDEPENDENT CLAIMS       |                                                              |                                                                                                 |                                                            | nus 3 =                                                                    | * 0                                                                                   |                                                                |          | X43=                                                                              |                        | OR             | X86=                                                                                     |                     |
| 1ULT                    | IPLE DEPEND                                                  | ENT CLAIM P                                                                                     | RESENT                                                     |                                                                            |                                                                                       |                                                                |          | +145=                                                                             |                        | OR             | +290=                                                                                    |                     |
| If th                   | e difference i                                               | n column 1 is                                                                                   | less than ze                                               | ero, ente                                                                  | er "0" in c                                                                           | olumn·2                                                        |          | TOTAL                                                                             | 355                    | OR             | TOTAL                                                                                    |                     |
|                         |                                                              | LAIMS AS A                                                                                      |                                                            | - PAF                                                                      | RT II                                                                                 |                                                                |          | SMALL E                                                                           | ENTITY                 | OR             | OTHER<br>SMALL                                                                           |                     |
|                         |                                                              | (Column 1)                                                                                      |                                                            |                                                                            | ımn 2)<br>HEST                                                                        | (Column 3)                                                     | <b>ו</b> |                                                                                   | ADDI-                  |                |                                                                                          | ADDI                |
| ¥                       |                                                              | CLAIMS<br>REMAINING<br>AFTER                                                                    |                                                            | NUM<br>PREV                                                                | MBER<br>HOUSLY<br>D FOR                                                               | PRESENT<br>EXTRA                                               |          | RATE                                                                              | TIONAL<br>FEE          |                | RATE                                                                                     | TIONA<br>FEE        |
| ME -                    | Fadal                                                        | *                                                                                               | Minus                                                      | **                                                                         | 31011                                                                                 | =                                                              | 1        | X\$ 9=                                                                            |                        | OR             | X\$18=                                                                                   |                     |
|                         | Total<br>Independent                                         | <u>^</u>                                                                                        | Minus                                                      | ***                                                                        |                                                                                       | =                                                              | ]        | X43=                                                                              |                        | OR             | X86=                                                                                     |                     |
| AMENDMENT               | FIRST PRESENTATION OF MULTIPLE DEPENDEN                      |                                                                                                 |                                                            | NT CLAIM                                                                   |                                                                                       |                                                                |          |                                                                                   | 1                      | .000-          |                                                                                          |                     |
| م ا                     | FIRST PRESE                                                  | NTATION OF M                                                                                    | TOLTIPLE DE                                                | I LIVEL                                                                    |                                                                                       |                                                                |          | .445_                                                                             |                        |                | 1 +290=                                                                                  | 1                   |
| ا                       | FIRST PRESE                                                  | NTATION OF M                                                                                    | OLTIPLE DE                                                 | T ENDE.                                                                    |                                                                                       |                                                                |          | +145=                                                                             |                        | OR             | TOTAL                                                                                    |                     |
| 4                       | FIRST PRESE                                                  |                                                                                                 | OLTIPLE DE                                                 |                                                                            |                                                                                       |                                                                | 3)       | +145=<br>TOTAL<br>ADDIT. FEE                                                      |                        | OR<br>OR       | TOTAL                                                                                    | L                   |
| <b>a</b>                | FIRST PRESE                                                  | (Column 1)                                                                                      | OLTIPLE DE                                                 | (Col                                                                       | lumn 2)<br>GHEST                                                                      | (Column 3                                                      | 7        | TOTAL                                                                             | ADDI-                  | ]<br> <br>     | TOTAL<br>ADDIT. FEE                                                                      | ADD                 |
| <b>B</b>                | FIRST PRESE                                                  | (Column 1)<br>CLAIMS<br>REMAINING<br>AFTER                                                      |                                                            | (Col<br>Hic<br>NL<br>PRE                                                   | lumn 2)<br>GHEST<br>JMBER<br>VIOUSLY                                                  |                                                                | 7        | TOTAL                                                                             |                        | ]<br> <br>     | TOTAL                                                                                    | ADD<br>TION         |
| <b>B</b>                |                                                              | (Column 1) CLAIMS REMAINING AFTER AMENDMENT                                                     |                                                            | (Col<br>Hic<br>NL<br>PRE                                                   | lumn 2)<br>GHEST<br>JMBER                                                             | (Column 3                                                      | 7        | TOTAL<br>ADDIT. FEE                                                               | ADDI-<br>TIONAL        | ]<br> <br>     | ADDIT. FEE                                                                               | ADD<br>TION         |
| <b>B</b>                | Total                                                        | (Column 1)<br>CLAIMS<br>REMAINING<br>AFTER                                                      | T                                                          | (Col<br>HIC<br>NL<br>PRE<br>PA                                             | lumn 2)<br>GHEST<br>JMBER<br>VIOUSLY                                                  | (Column 3                                                      | 7        | TOTAL<br>ADDIT. FEE                                                               | ADDI-<br>TIONAL        | OR             | TOTAL ADDIT. FEE                                                                         | ADD<br>TION         |
| 8                       | Total<br>Independent                                         | (Column 1) CLAIMS REMAINING AFTER AMENDMENT                                                     | Minus<br>Minus                                             | (Col<br>HIG<br>NU<br>PRE<br>PA                                             | Jumn 2)<br>GHEST<br>JMBER<br>VIOUSLY<br>IID FOR                                       | (Column 3 PRESENT EXTRA                                        | 7        | TOTAL ADDIT. FEE  RATE  X\$ 9=                                                    | ADDI-<br>TIONAL        | OR             | RATE  X\$18=  X86=                                                                       | ADD<br>TION<br>FEE  |
| m                       | Total<br>Independent                                         | (Column 1) CLAIMS REMAINING AFTER AMENDMENT                                                     | Minus<br>Minus                                             | (Col<br>HIG<br>NU<br>PRE<br>PA                                             | Jumn 2)<br>GHEST<br>JMBER<br>VIOUSLY<br>IID FOR                                       | (Column 3 PRESENT EXTRA                                        | 7        | TOTAL ADDIT. FEE  RATE  X\$ 9=  X43=  +145=  TOTAL                                | ADDI-<br>TIONAL<br>FEE | OF<br>OF       | TOTAL ADDIT. FEE RATE    X\$18=   X86=   +290=   TOTAL                                   | ADD<br>TION<br>FEE  |
| 8                       | Total<br>Independent                                         | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  * * ENTATION OF 1                                  | Minus<br>Minus<br>MULTIPLE DE                              | (Col<br>HIC<br>NL<br>PRE'<br>PA                                            | Jumn 2) GHEST JMBER VIOUSLY ID FOR                                                    | PRESENT EXTRA                                                  |          | TOTAL ADDIT. FEE  RATE  X\$ 9=  X43=  +145=                                       | ADDI-<br>TIONAL<br>FEE | OF<br>OF       | TOTAL ADDIT. FEE RATE    X\$18=   X86=   +290=   TOTAL                                   | ADD<br>TION<br>FEE  |
| m                       | Total<br>Independent                                         | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  * * ENTATION OF I                                  | Minus<br>Minus<br>MULTIPLE DE                              | (Col<br>HIC<br>NL<br>PRE'<br>PA<br>***                                     | Jumn 2)<br>GHEST<br>JMBER<br>VIOUSLY<br>IID FOR                                       | (Column 3 PRESENT EXTRA                                        |          | TOTAL ADDIT. FEE  RATE  X\$ 9=  X43=  +145=  TOTAL                                | ADDI-<br>TIONAL<br>FEE | OF<br>OF<br>OF | TOTAL ADDIT. FEE RATE    X\$18=   X86=   +290=   TOTAL                                   | ADD<br>TION<br>FEE  |
| C AMENDMENT B           | Total<br>Independent                                         | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  *  *  COlumn 1 CLAIMS REMAINING AFTER              | Minus Minus MULTIPLE DE                                    | (Col<br>HIC<br>NL<br>PRE'<br>PA<br>***<br>EPENDE                           | Jumn 2) GHEST JMBER VIOUSLY ID FOR  NT CLAIN DIUMN 2) IGHEST JUMBER EVIOUSLY          | PRESENT EXTRA                                                  | 3)       | TOTAL ADDIT. FEE  RATE  X\$ 9=  X43=  +145=  TOTAL                                | ADDI-<br>TIONAL<br>FEE | OF<br>OF       | TOTAL ADDIT. FEE RATE    X\$18=   X86=   +290=   TOTAL                                   | ADD<br>TION<br>FEE  |
| C AMENDMENT B           | Total<br>Independent<br>FIRST PRESE                          | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  * * ENTATION OF I                                  | Minus Minus MULTIPLE DE                                    | (Col<br>HIC<br>NL<br>PRE'<br>PA<br>***<br>EPENDE                           | Jumn 2) GHEST JMBER VIOUSLY ID FOR ENT CLAIN DIUMN 2) IGHEST JUMBER                   | (Column 3  PRESENT EXTRA  = = (Column PRESENT)                 | 3)       | TOTAL ADDIT. FEE  RATE  X\$ 9=  X43=  +145=  TOTAL ADDIT. FEE                     | ADDI-<br>TIONAL<br>FEE | OF<br>OF       | RATE  X\$18=  X86=  +290=  TOTA ADDIT. FE                                                | ADD<br>TION<br>FEE  |
| C AMENDMENT B           | Total Independent FIRST PRESE                                | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  *  *  (Column 1 CLAIMS REMAINING AFTER AMENDMEN    | Minus Minus MULTIPLE DE                                    | (Col<br>HIC<br>NL<br>PRE'<br>PA<br>***<br>EPENDE                           | Jumn 2) GHEST JMBER VIOUSLY ID FOR  NT CLAIN DIUMN 2) IGHEST JUMBER EVIOUSLY          | (Column 3 PRESENT EXTRA  = = (Column PRESEN) EXTRA             | 3)       | TOTAL ADDIT. FEE  RATE  X\$ 9=  X43=  +145=  TOTAL ADDIT. FEE                     | ADDI-<br>TIONAL<br>FEE | OF OF OF       | RATE  X\$18=  X86=  +290=  TOTAL  ADDIT. FEE                                             | ADD<br>TION<br>FEE  |
| AMENDMENT B             | Total Independent FIRST PRESE                                | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  *  *  (Column 1 CLAIMS REMAINING AFTER AMENDMEN    | Minus Minus MULTIPLE DE                                    | (Col<br>HIC<br>NL<br>PRE'<br>PA<br>***<br>***<br>***<br>***<br>***<br>***  | Jumn 2) GHEST JMBER VIOUSLY JID FOR ENT CLAIN DIUMN 2) IGHEST JUMBER EVIOUSLY AID FOR | (Column 3 PRESENT EXTRA  = = (Column PRESEN EXTRA              | 3)       | TOTAL ADDIT. FEE  RATE  X\$ 9=  X43=  +145=  TOTAL ADDIT. FEE  RATE  X\$ 9=  X43= | ADDI-<br>TIONAL<br>FEE | OF OF OF OF OF | RATE  X\$18=  X\$6=  TOTAL  ADDIT. FEE  RATE  X\$18=  X86=  RATE  X\$18=  X\$18=  X\$18= | ADD<br>TION/<br>FEE |
| AMENDMENT C AMENDMENT B | Total Independent FIRST PRESE  Total Independent FIRST PRESE | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  *  *  (Column 1 CLAIMS REMAINING AFTER AMENDMEN  * | Minus Minus MULTIPLE DE  Minus  Minus  Minus  Minus  Minus | (Col<br>HIC<br>PRE<br>PA<br>***<br>EPENDE<br>(Cc<br>H N<br>PRE<br>P/<br>** | Olumn 2)  Olumn 2)  Olumn 2)  IGHEST  IUMBER  EVIOUSLY  AID FOR                       | (Column 3 PRESENT EXTRA  = =  (Column PRESENT EXTRA  = =  =  M | 3)       | TOTAL ADDIT. FEE  RATE  X\$ 9=  X43=  +145=  TOTAL ADDIT. FEE  RATE  X\$ 9=       | ADDI-<br>TIONAL<br>FEE | OF OF OF       | RATE  X\$18=  X\$6=  TOTAL  ADDIT. FEE  RATE  X\$18=  X86=  RATE  X\$18=  X\$18=  X\$18= | ADD<br>TION<br>FEE  |

<sup>\*\*\*</sup>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.